STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS AND MINING FORM 3 AMENDED REPORT									
APPLICATION FOR PERMIT TO DRILL						1. WELL NAME and NUMBER Federal 14-23-6-20			
2. TYPE OF WORK DRILL NEW WELL REENTER P&A WELL DEEPEN WELL						3. FIELD OR WILDCAT UNDESIGNATED			
4. TYPE OF WELL Oil Well Coalbed Methane Well: NO						5. UNIT or COMMUNITIZATION AGREEMENT NAME			
6. NAME OF OPERATOR NEWFIELD PRODUCTION COMPANY						7. OPERATOR PHONE 435 646-4825			
8. ADDRESS OF OPERATOR Rt 3 Box 3630 , Myton, UT, 84052						9. OPERATOR E-MAIL mcrozier@newfield.com			
10. MINERAL LEASE NUMBER (FEDERAL, INDIAN, OR STATE) UTU-74414	11. MINERAL OWNER	L. MINERAL OWNERSHIP				12. SURFACE OWNERSHIP FEDERAL INDIAN STATE FEE			
13. NAME OF SURFACE OWNER (if box 12 = 'fee')						14. SURFACE OWNER PHONE (if box 12 = 'fee')			
15. ADDRESS OF SURFACE OWNER (if box 12 = 'fee')						16. SURFACE OWNER E-MAIL (if box 12 = 'fee')			
17. INDIAN ALLOTTEE OR TRIBE NAME (if box 12 = 'INDIAN')		18. INTEND TO COMMINGLE PRODUCTION FROM MULTIPLE FORMATIONS YES (Submit Commingling Application) NO (19. SLANT			
								ORIZONTAL ()	
20. LOCATION OF WELL	FOO	OTAGES	QTR-QTR	SECTI	ION	TOWNSHIP	RANGE	MERIDIAN	
		L 1881 FWL SESW		23		6.0 S	20.0 E	S	
Top of Uppermost Producing Zone 522 FSI		1881 FWL	SESW	23		6.0 S	20.0 E	S	
At Total Depth	522 FSL 1881 FWL		SESW 23			6.0 S	20.0 E	S	
21. COUNTY UINTAH 22. DISTANCE TO NEARES			AREST LEASE LIN 522						
25. DISTANCE TO NEAR (Applied For Drilling or				AME POOL	-	26. PROPOSED DEPTH MD: 8120 TVD: 8120			
27. ELEVATION - GROUND LEVEL		28. BOND NUMBER				29. SOURCE OF DRILLING WATER / WATER RIGHTS APPROVAL NUMBER IF APPLICABLE 439077			
4907	WYB000493					439077			
		AT	TACHMENTS						
VERIFY THE FOLLOWING	ARE ATTACHE	D IN ACCORDANC	CE WITH THE U	TAH OIL	AND G	GAS CONSERVAT	ION GENERAL R	ULES	
WELL PLAT OR MAP PREPARED BY LICENSED SURVEYOR OR ENGINEER				COMPLETE DRILLING PLAN					
AFFIDAVIT OF STATUS OF SURFACE OWNER AGREEMENT (IF FEE SURFACE)				FORM 5. IF OPERATOR IS OTHER THAN THE LEASE OWNER					
DIRECTIONAL SURVEY PLAN (IF DIRECTIONALLY OR HORIZONTALLY DRILLED)				TOPOGRAPHICAL MAP					
NAME Mandie Crozier	TITLE Regulatory Tech P			PHON	HONE 435 646-4825				
SIGNATURE DATE 08/10/2010					EMAI	AIL mcrozier@newfield.com			
APPROVAL 43047512310000				Baccyfill					
	F				Permit Manager				

